



HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2015
OF THE CONDITION AND AFFAIRS OF THE

Humana Benefit Plan of Illinois, Inc.

NAIC Group Code01190119NAIC Company Code60052Employer's ID Number37-1326199
(Current)(Prior)

Organized under the Laws ofIllinois, State of Domicile or Port of EntryIllinois

Country of DomicileUnited States of America

Licensed as business type:Life, Accident & Health

Is HMO Federally Qualified? Yes [] No []

Incorporated/Organized06/20/1994Commenced Business02/01/1995

Statutory Home Office7915 N. Hale Ave., Ste. DPeoria, IL, US 61615
(Street and Number)(City or Town, State, Country and Zip Code)

Main Administrative Office500 West Main StreetLouisville, KY, US 40202502-580-1000
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Mail AddressP.O. Box 740036Louisville, KY, US 40201-7436
(Street and Number or P.O. Box)(City or Town, State, Country and Zip Code)

Primary Location of Books and Records500 West Main StreetLouisville, KY, US 40202502-580-1000
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website Addresswww.humana.com

Statutory Statement ContactMallory Ray502-580-3357
(Name)(Area Code) (Telephone Number)
DOIINQUIRIES@humana.com502-580-2099
(E-mail Address)(FAX Number)

OFFICERS

President & CEO	Bruce Dale Broussard	Sr. VP & CFO	Brian Andrew Kane
VP & Corporate Secretary	Joan Olliges Lenahan	VP & Appointed Actuary & Interim Chief Actuary	Jonathan Albert Canine

OTHER

Alan James Bailey VP & Treasurer	Elizabeth Diane Bierbower Pres, Group Segment	Renee Jacqueline Buckingham # VP & Division Leader - Eastern Division
John Gregory Catron VP & Chief Compliance Officer	Michael Lester Cotton Vice President	Charles Wilbur Dow Jr. # Reg. Pres-Sr Products/Great Lakes Reg.
Mark Sobhi El-Tawil VP & Div. Leader - Western Div.	Jeffrey Carl Fernandez Seg. VP, Medicare: West	Brian Phillip LeClaire Sr. VP & Chief Info Officer
Heidi Suzanne Margulis Sr. Vice President	Mark Matthew Matzke # VP, Group Segment Leadership	Steven Edward McCulley SVP, Medicare Operations
Kevin Ross Meriwether VP & Div. Leader - Southeastern Div.	Matthew George Moore # Reg. Pres.-Sr. Prods./Central North Reg.	William Mark Preston VP-Investment Management
Tamara Lynn Quiram Seg. VP & Pres., Small Business & Large Group	Richard Donald Remmers VP, Group Segment	George Renaudin Seg. VP, Medicare: East
Donald Hank Robinson Vice President - Tax	Joseph Christopher Ventura Assistant Corporate Secretary	Timothy Alan Wheatley President, Retail Segment
Ralph Martin Wilson Vice President	Cynthia Hillebrand Zipperle # VP & Chief Accounting Officer	

DIRECTORS OR TRUSTEES

Bruce Dale Broussard	Neal Curtis Fischer M.D.	Brian Andrew Kane #
James Elmer Murray	William Reed Snyder	Ross Alan Westreich

State ofKentuckySS:

County ofJefferson

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Bruce Dale Broussard
President & CEO

Joan Olliges Lenahan
VP & Corporate Secretary

Alan James Bailey
VP & Treasurer

Subscribed and sworn to before me this10thday ofNovember, 2015

a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number.....
2. Date filed
3. Number of pages attached.....

Michele Sizemore
Notary Public
January 3, 2019

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	71,470,092	0	71,470,092	52,778,680
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$0 encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$0 encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$0 encumbrances)	0	0	0	0
5. Cash (\$(4,200,825)), cash equivalents (\$39,997,067) and short-term investments (\$43,918,710)	79,714,952	0	79,714,952	7,615,230
6. Contract loans (including \$0 premium notes)	0	0	0	0
7. Derivatives	0	0	0	0
8. Other invested assets	0	0	0	0
9. Receivables for securities	205,524	0	205,524	0
10. Securities lending reinvested collateral assets	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	151,390,568	0	151,390,568	60,393,910
13. Title plants less \$0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	534,027	0	534,027	527,708
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	7,664,895	307,248	7,357,647	4,161,280
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums	322,918	0	322,918	1,055
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	4,275	0	4,275	0
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	1,061	0	1,061	0
17. Amounts receivable relating to uninsured plans	16,595,714	0	16,595,714	5,277,541
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	0
18.2 Net deferred tax asset	5,000,700	49,247	4,951,453	4,951,453
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	3,123	0	3,123	6,870
21. Furniture and equipment, including health care delivery assets (\$0)	118,257	118,257	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	1,301,677	0	1,301,677	4,951,195
24. Health care (\$7,887,134) and other amounts receivable	9,387,400	1,500,257	7,887,143	1,671,552
25. Aggregate write-ins for other than invested assets	10,679,732	1,455,140	9,224,592	6,579,361
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	203,004,347	3,430,149	199,574,198	88,521,925
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	203,004,347	3,430,149	199,574,198	88,521,925
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Risk Adjustment Premium Receivables	9,187,389	0	9,187,389	6,554,392
2502. Prepaid Commissions	1,236,843	1,236,843	0	0
2503. Provider Contracts	117,982	117,982	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	137,518	100,315	37,203	24,969
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	10,679,732	1,455,140	9,224,592	6,579,361

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$35,210 reinsurance ceded)	57,387,085	5,703,989	63,091,074	24,241,030
2. Accrued medical incentive pool and bonus amounts	0	0	0	0
3. Unpaid claims adjustment expenses	1,378,764	0	1,378,764	363,869
4. Aggregate health policy reserves, including the liability of \$196 for medical loss ratio rebate per the Public Health Service Act	409,174	0	409,174	169,897
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserve	0	0	0	0
7. Aggregate health claim reserves	0	0	0	0
8. Premiums received in advance	1,258,535	0	1,258,535	1,016,051
9. General expenses due or accrued	331,729	0	331,729	105,317
10.1 Current federal and foreign income tax payable and interest thereon (including \$80,755 on realized gains (losses))	1,427,747	0	1,427,747	322,600
10.2 Net deferred tax liability	0	0	0	0
11. Ceded reinsurance premiums payable	39,318	0	39,318	1,957
12. Amounts withheld or retained for the account of others.....	136	0	136	0
13. Remittances and items not allocated	5,630	0	5,630	228,719
14. Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current)	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates	0	0	0	0
16. Derivatives	0	0	0	0
17. Payable for securities	415,000	0	415,000	0
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$0) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	441,121	0	441,121	182,217
23. Aggregate write-ins for other liabilities (including \$429,095 current)	429,095	0	429,095	37,044
24. Total liabilities (Lines 1 to 23)	63,523,334	5,703,989	69,227,323	26,668,701
25. Aggregate write-ins for special surplus funds	XXX	XXX	9,165,118	4,957,377
26. Common capital stock	XXX	XXX	2,500,000	2,500,000
27. Preferred capital stock	XXX	XXX	0	0
28. Gross paid in and contributed surplus	XXX	XXX	125,300,000	55,300,000
29. Surplus notes	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(6,618,243)	(904,153)
32. Less treasury stock, at cost:				
32.1 .....0 shares common (value included in Line 26 \$0)	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$0)	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	130,346,875	61,853,224
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	199,574,198	88,521,925
DETAILS OF WRITE-INS				
2301. Risk Adjustment Premium Payables	429,095	0	429,095	37,044
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	429,095	0	429,095	37,044
2501. Special Surplus – Projected HCRL Assessment for the Upcoming Year	XXX	XXX	9,165,118	4,957,377
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	9,165,118	4,957,377
3001.	XXX	XXX	0	0
3002.	XXX	XXX	0	0
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	598,801	261,889	354,286
2. Net premium income (including \$0 non-health premium income).....	XXX	522,364,309	211,863,877	280,194,697
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(196)	0	0
4. Fee-for-service (net of \$0 medical expenses).....	XXX	0	0	0
5. Risk revenue	XXX	0	0	0
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	522,364,113	211,863,877	280,194,697
Hospital and Medical:				
9. Hospital/medical benefits	39,819,271	371,750,758	143,902,093	193,759,654
10. Other professional services	0	14,715,168	4,530,385	5,941,726
11. Outside referrals	0	0	0	0
12. Emergency room and out-of-area	1,470,091	15,415,254	2,655,615	3,882,646
13. Prescription drugs	0	54,691,309	17,863,369	21,759,625
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts	0	244,378	0	0
16. Subtotal (Lines 9 to 15)	41,289,362	456,816,867	168,951,462	225,343,651
Less:				
17. Net reinsurance recoveries	0	120,666	0	0
18. Total hospital and medical (Lines 16 minus 17)	41,289,362	456,696,201	168,951,462	225,343,651
19. Non-health claims (net)	0	0	0	0
20. Claims adjustment expenses, including \$17,224,211 cost containment expenses	0	19,945,709	7,094,265	9,975,110
21. General administrative expenses	0	40,452,524	16,395,811	22,297,750
22. Increase in reserves for life and accident and health contracts (including \$0 increase in reserves for life only)	0	0	0	(1,981,000)
23. Total underwriting deductions (Lines 18 through 22).....	41,289,362	517,094,434	192,441,538	255,635,511
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	5,269,679	19,422,339	24,559,186
25. Net investment income earned	0	1,490,292	1,503,804	2,199,248
26. Net realized capital gains (losses) less capital gains tax of \$228,326	0	424,035	15,322	82,515
27. Net investment gains (losses) (Lines 25 plus 26)	0	1,914,327	1,519,126	2,281,763
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$0) (amount charged off \$0)].....	0	0	0	0
29. Aggregate write-ins for other income or expenses	0	5	234	(923)
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	7,184,011	20,941,699	26,840,026
31. Federal and foreign income taxes incurred	XXX	6,884,891	7,018,330	7,304,748
32. Net income (loss) (Lines 30 minus 31)	XXX	299,120	13,923,369	19,535,278
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901. Miscellaneous Income	0	5	234	152
2902. Loss on Disposal	0	0	0	(1,075)
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	5	234	(923)

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	61,853,224	45,928,579	45,928,579
34. Net income or (loss) from Line 32	299,120	13,923,369	19,535,278
35. Change in valuation basis of aggregate policy and claim reserves	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ 0	(35,363)	964	627
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38. Change in net deferred income tax	0	0	(2,902,581)
39. Change in nonadmitted assets	(1,770,106)	167,399	1,291,321
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles.....	0	0	0
44. Capital Changes:			
44.1 Paid in	0	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....	0	0	0
45. Surplus adjustments:			
45.1 Paid in	70,000,000	(2,000,000)	(2,000,000)
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital	0	0	0
46. Dividends to stockholders	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	68,493,651	12,091,732	15,924,645
49. Capital and surplus end of reporting period (Line 33 plus 48)	130,346,875	58,020,311	61,853,224
DETAILS OF WRITE-INS			
4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	516,950,566	207,332,420	276,009,023
2. Net investment income	1,837,242	1,752,528	2,293,632
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	518,787,808	209,084,948	278,302,655
5. Benefit and loss related payments	425,358,161	161,233,440	216,486,064
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	70,216,188	26,284,873	37,599,744
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$183,752 tax on capital gains (losses)	6,008,070	4,606,944	7,010,341
10. Total (Lines 5 through 9)	501,582,419	192,125,257	261,096,149
11. Net cash from operations (Line 4 minus Line 10)	17,205,389	16,959,691	17,206,506
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	29,723,433	11,474,379	27,669,418
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(198)	(15)	(15)
12.7 Miscellaneous proceeds	416,208	484,693	637
12.8 Total investment proceeds (Lines 12.1 to 12.7)	30,139,443	11,959,057	27,670,040
13. Cost of investments acquired (long-term only):			
13.1 Bonds	48,152,126	24,589,725	29,962,700
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	205,524	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	48,357,650	24,589,725	29,962,700
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(18,218,207)	(12,630,668)	(2,292,660)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	70,000,000	(2,000,000)	(2,000,000)
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied)	3,112,541	(1,732,829)	(5,506,138)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	73,112,541	(3,732,829)	(7,506,138)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) ..	72,099,723	596,194	7,407,709
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	7,615,230	207,521	207,521
19.2 End of period (Line 18 plus Line 19.1)	79,714,952	803,715	7,615,230

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	29,745	0	0	1	2,536	844	1,066	25,298	0	0
2. First Quarter	65,596	0	0	0	0	0	1,010	64,586	0	0
3. Second Quarter	66,561	0	0	0	0	0	1,001	65,560	0	0
4. Third Quarter	68,646	0	0	11	0	0	980	67,655	0	0
5. Current Year	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months	598,801	0	0	80	0	0	8,912	589,809	0	0
Total Member Ambulatory Encounters for Period:										
7. Physician	918,419	0	0	110	0	0	8,538	909,771	0	0
8. Non-Physician	511,820	0	0	88	0	0	3,190	508,542	0	0
9. Total	1,430,239	0	0	198	0	0	11,728	1,418,313	0	0
10. Hospital Patient Days Incurred	118,660	0	0	4	0	0	146	118,510	0	0
11. Number of Inpatient Admissions	13,891	0	0	1	0	0	41	13,849	0	0
12. Health Premiums Written (a)	522,545,809	0	0	11,509	0	0	4,981,040	517,553,260	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	522,545,613	0	0	11,509	0	0	4,980,844	517,553,260	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services.....	424,158,509	0	0	12,850	13,599	5,001	5,418,148	418,708,911	0	0
18. Amount Incurred for Provision of Health Care Services	456,816,867	0	0	14,604	0	0	6,015,450	450,786,813	0	0

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$517,553,260

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

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UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical)	0	0	0	0	0	0
2. Medicare Supplement	0	12,850	32	1,722	32	0
3. Dental Only	5,001	0	0	0	5,001	5,001
4. Vision Only	13,599	0	0	0	13,599	13,599
5. Federal Employees Health Benefits Plan	566,533	4,851,613	80,973	1,180,586	647,506	655,755
6. Title XVIII - Medicare	19,131,885	399,247,192	774,724	61,053,037	19,906,609	23,566,675
7. Title XIX - Medicaid	0	0	0	0	0	0
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	19,717,018	404,111,655	855,729	62,235,345	20,572,747	24,241,030
10. Healthcare receivables (a)	0	7,917,540	0	0	0	1,690,646
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	0	244,378	0	0	0	0
13. Totals (Lines 9-10+11+12)	19,717,018	396,438,493	855,729	62,235,345	20,572,747	22,550,384

(a) Excludes \$ 0 loans or advances to providers not yet expensed.

STATEMENT AS OF September 30, 2015 OF Humana Benefit Plan of Illinois, Inc.

NOTES TO THE FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Illinois Department of Insurance.

The Illinois Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the State of Illinois for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Illinois Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Illinois. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices. No deviations exist.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Illinois is shown below:

	State of Domicile		2015	2014
Net Income				
1. Humana Benefit Plan of Illinois, Inc. Illinois basis	IL	\$	299,120	\$ 19,535,278
2. State Prescribed Practices that increase/(decrease) NAIC SAP	IL		-	-
3. State Permitted Practices that increase/(decrease) NAIC SAP	IL		-	-
4. NAIC SAP	IL	\$	<u>299,120</u>	<u>\$ 19,535,278</u>
Surplus				
5. Humana Benefit Plan of Illinois, Inc. Illinois basis	IL	\$	130,346,875	\$ 61,853,224
6. State Prescribed Practices that increase/(decrease) NAIC SAP	IL		-	-
7. State Permitted Practices that increase/(decrease) NAIC SAP	IL		-	-
8. NAIC SAP	IL	\$	<u>130,346,875</u>	<u>\$ 61,853,224</u>

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. These estimates are based on knowledge of current events and anticipated future events, and accordingly, actual results could differ from those estimates.

C. Accounting Policy

Premiums are reported as earned in the period in which members are entitled to receive services, and are net of retroactive membership adjustments. Retroactive membership adjustments result from enrollment changes not yet processed, or not yet reported by an employer group or the government. Premiums received prior to such period are recorded as advance premiums.

Benefits incurred and loss adjustment expenses include claim payments, capitation payments, pharmacy costs net of rebates, allocations of certain centralized expenses, legal and administrative costs to settle claims, and various other costs incurred to provide health insurance coverage to members, as well as estimates of future payments to hospitals and others for medical care provided prior to the date of the statements of admitted assets, liabilities and surplus. Capitation payments represent monthly contractual fees disbursed to participating primary care physicians, and other providers who are responsible for providing medical care to members. Pharmacy costs represent payments for members' prescription drug benefits, net of rebates from drug manufacturers.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments mainly in U.S. Government obligations with a maturity of twelve months or less from the date of purchase. Short-term investments are recorded at amortized cost. The carrying value of short-term investments approximates fair value due to the short-term maturities of the investments.
- (2-4) Investments are valued and classified in accordance with methods prescribed by the NAIC. Bonds with an NAIC rating of 1 or 2 are carried at amortized cost, with all other bonds being recorded at the lower of amortized cost or fair value; redeemable preferred stocks are carried at amortized cost; and non-redeemable preferred stocks are carried at fair value. Common stocks are carried at fair value.

The Company regularly evaluates investment securities for impairment. For all securities other than loan-backed and structured securities, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value, the near term prospects for recovery to carrying value, and the Company's intent and ability to hold the investment until maturity or market recovery is realized. If and when a determination is made that a decline in fair value below the cost basis is other-than-temporary, the related investment is written down to its estimated fair value through earnings.

Amortization of bond premium or discount is computed using the scientific interest method.

NOTES TO THE FINANCIAL STATEMENTS

Income from investments is recorded on an accrual basis. For the purpose of determining realized gains and losses, the cost of securities sold is based upon specific identification. Investment income due and accrued over 90 days past due is nonadmitted.

- (5) Not Applicable.
- (6) For loan backed and structured securities where the securities fair value is less than the amortized cost, the Company considers several factors to determine if the security's impairment is other-than-temporary. If the Company has the intent to sell the security or if the Company does not have the intent and ability to retain the security until recovery of its fair value, the related investment is written down to its estimated fair value through earnings. If, however, the Company has the intent and ability to retain the security until recovery of its fair value, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value and the near term prospects for recovery to carrying value. If the determination is made, based on these factors, that the Company does expect to recover the entire amortized cost of the security, then an other-than-temporary impairment has not occurred. If, however, the determination is made that the Company does not expect to recover the entire amortized cost of the security based on the factors noted above, the Company recognizes a realized loss in earnings for the non-interest related decline. No loss is recognized for the interest impairment.
- (7) Not Applicable.
- (8) Not Applicable.
- (9) Not Applicable.
- (10-11) The estimates of future medical benefit payments are developed using actuarial methods and assumptions based upon claim payment patterns, medical cost inflation, historical development such as claim inventory levels and claim receipt patterns, and other relevant factors. Corresponding administrative costs to process outstanding claims are estimated and accrued. Estimates of future payments relating to services incurred in the current and prior periods are continually reviewed by management and adjusted as necessary.

The Company assesses the profitability of its contracts for providing health insurance coverage to its members when current operating results or forecasts indicate probable future losses. The Company records a premium deficiency liability in current operations to the extent that the sum of expected future medical costs, claim adjustment expenses and maintenance costs exceed related future premiums. Investment income is not contemplated in the calculation of the premium deficiency liability.

Management believes the Company's benefits payable and loss adjustment expense are adequate to cover future claims and loss adjustment expense payments required, however, such estimates are based on knowledge of current events and anticipated future events and, therefore, the actual liability could differ from the amounts provided.

- (12) The Company has not modified its capitalization policy from the prior period.

Equipment is stated at cost less accumulated depreciation. Depreciation expense is computed using the straight-line method over estimated useful lives generally ranging from three to five years. Improvements to leased facilities are depreciated over the shorter of the remaining lease term or the anticipated life of the improvement.

The Company recognizes an asset or liability for the deferred tax consequences of temporary differences between the tax bases of assets or liabilities and their reported amounts in the financial statements. The temporary differences will result in taxable or deductible amounts in future years when the reported amounts of the assets or liabilities are recovered or settled.
- (13) The Company estimates anticipated Pharmacy Rebate Receivables using the analysis of historical recovery patterns.
- (14) Not Applicable.
- (15) Not Applicable.

2. Accounting Changes and Corrections of Errors

Not Applicable.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not Applicable.

B. Statutory Merger

Not Applicable.

C. Assumption Reinsurance

Not Applicable.

D. Impairment Loss

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

4. Discontinued Operations

Not Applicable.

5. Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

Not Applicable.

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

D. Loan-Backed Securities

(1) Not Applicable.

(2) Not Applicable.

(3) Not Applicable.

(4) The Company does not have any investments in an other-than-temporary impairment position at September 30, 2015.

Gross unrealized losses and related fair value of temporarily impaired securities that have been in a continuous unrealized loss position were as follows at September 30, 2015:

(a) The aggregate amount of unrealized losses:

1. Less than Twelve Months	\$	(39,221)
2. Twelve Months or Longer	\$	(265,109)

(b) The aggregate related fair value of securities with unrealized losses:

1. Less than Twelve Months	\$	9,741,142
2. Twelve Months or Longer	\$	2,947,137

The unrealized losses at September 30, 2015 were primarily due to increases in market interest rates and tighter liquidity conditions in the current markets than when the securities were purchased. All issuers of securities trading at an unrealized loss remain current on all contractual payments and the Company believes it is probable that all amounts due according to the contractual terms of the debt securities are collectible. After taking into account these and other factors, including the severity of the decline and the Company's ability and intent to hold these securities until recovery or maturity, the Company determined the unrealized losses on these investment securities were temporary and, as such, no impairment was required.

(5) Not Applicable.

E. Repurchase Agreements and/or Securities Lending Transactions

(1) The Company has no repurchase agreements or securities lending transactions.

(2) The Company has not pledged any of its assets as collateral.

(3-7) Not Applicable.

F. Real Estate

Not Applicable.

G. Low-Income Housing Tax Credits (LIHTC)

Not Applicable.

STATEMENT AS OF September 30, 2015 OF Humana Benefit Plan of Illinois, Inc.

NOTES TO THE FINANCIAL STATEMENTS

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Total Gross Restricted from Current Year	Total Gross Restricted from Prior Year	Increase/ (Decrease)	Total Current Year Admitted Restricted	Percentage Gross Restricted to Total Assets	Percentage Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	-%	-%
b. Collateral held under security lending agreements	-	-	-	-	-	-
c. Subject to repurchase agreements	-	-	-	-	-	-
d. Subject to reverse repurchase agreements	-	-	-	-	-	-
e. Subject to dollar repurchase agreements	-	-	-	-	-	-
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-
g. Placed under option contracts	-	-	-	-	-	-
h. Letter stock or securities restricted to sale – excluding FHLB capital stock	-	-	-	-	-	-
i. FHLB capital stock	-	-	-	-	-	-
j. On deposit with states	3,208,288	3,250,689	(42,401)	3,208,288	1.58%	1.61%
k. On deposit with other regulatory bodies	-	-	-	-	-	-
l. Pledged collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-
n. Other restricted assets	-	-	-	-	-	-
o. Total Restricted Assets	\$ 3,208,288	\$ 3,250,689	\$ (42,401)	\$ 3,208,288	1.58%	1.61%

(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not Applicable.

(3) Detail of Other Restricted Assets Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not Applicable.

I. Working Capital Finance Investments

Not Applicable.

J. Offsetting and Netting of Assets and Liabilities

Not Applicable.

K. Structured Notes

Not Applicable.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10.0 percent of its admitted assets.

B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

7. Investment Income

A. Due and accrued income was excluded from surplus on the following basis:

All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loans in default.

B. The total amount excluded was \$0.

8. Derivative Instruments

Not Applicable.

STATEMENT AS OF September 30, 2015 OF Humana Benefit Plan of Illinois, Inc.

NOTES TO THE FINANCIAL STATEMENTS

9. Income Taxes

No material change since year-end December 31, 2014.

10. Information Concerning Parent, Subsidiaries and Affiliates

A.-F. The Company has several management contracts with Humana Inc. and other related parties whereby the Company is provided with medical and executive management, information systems, claims processing, billing and enrollment, and telemarketing and other services as required by the Company. Management fees charged to operations for the years ended December 31, 2014 and 2013 were \$32,494,964 and \$17,603,761, respectively. As a part of this agreement, Humana Inc. makes cash disbursements on behalf of the Company which includes, but is not limited to, medical related items, general and administrative expenses, commissions and payroll. Humana Inc. is reimbursed by the Company weekly, based upon historical pattern of amounts and timing. Each month, these estimates are adjusted to ultimately settle upon actual disbursements made on behalf of the Company. The Company continues to be primarily liable for any outstanding payments made on behalf of the Company, should Humana Inc. not be able to fulfill its obligations.

No dividends were paid by the Company as of September 30, 2015.

The Company received a \$20,000,000 and \$50,000,000 capital contribution from Humana, Inc. on June 25, 2015 and September 10, 2015, respectively.

At September 30, 2015, the Company reported \$1,301,677 due from Humana Inc. Amounts due to or from parent are generally settled within 30 days.

G. All outstanding shares of the Company are owned by the Parent Company.

H. Not Applicable.

I. Not Applicable.

J. Not Applicable.

K. Not Applicable.

L. Not Applicable.

11. Debt

A. Debt Including Capital Notes

The Company has no debentures outstanding.

The Company has no capital notes outstanding.

The Company does not have any reverse repurchase agreements.

B. Federal Home Loan Bank (FHLB) Agreements

The Company does not have any FHLB agreements.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A.-D. Defined Benefit Plans

Not Applicable.

E. Defined Contribution Plans

Not Applicable.

F. Multiemployer Plans

Not Applicable.

G. Consolidated/Holding Company Plans

No material change since year-end December 31, 2014.

H. Postemployment Benefits and Compensated Absences

Not Applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not Applicable.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

(1) The Company has \$25 par value common stock with 100,000 shares authorized and 100,000 shares issued and 100,000 outstanding. All shares are common stock shares.

NOTES TO THE FINANCIAL STATEMENTS

(2) The Company has no preferred stock outstanding.

(3-5) Dividends are noncumulative and are paid as determined by the Board of Directors. Dividends are subject to the approval of the Illinois Department of Insurance if such dividend distribution exceeds the lesser of the Company's prior year net operating profits or 10 percent of policyholders surplus funds derived from realized net operating profits.

Within the limitations above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

No dividends were paid by the Company as of September 30, 2015.

(6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.

(7) Not Applicable.

(8) Not Applicable.

(9) Changes in balances of special surplus funds from the prior year is due to the estimated health insurance industry fee that will be payable on September 30, 2016.

(10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$(35,363).

(11) Not Applicable.

(12) Not Applicable.

(13) Not Applicable.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

Not Applicable.

B. Assessments

Not Applicable.

C. Gain Contingencies

Not Applicable.

D. Claims related extra contractual obligation and bad faith losses stemming from lawsuits

Not Applicable.

E. Joint and Several Liabilities

Not Applicable.

F. All Other Contingencies

During the ordinary course of business, the Company is subject to pending and threatened legal actions. Management of the Company does not believe that any of these actions will have a material adverse effect on the Company's surplus, results of operations or cash flows. However, the likelihood or outcome of current or future legal proceedings cannot be accurately predicted, and they could adversely affect the Company's surplus, results of operations and cash flows.

The Company is not aware of any other material contingent liabilities as of September 30, 2015.

15. Leases

No material change since year-end December 31, 2014.

16. Information about Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company has no investment in Financial Instruments with Off-Balance Sheet Risk or Concentrations of Credit Risk.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not Applicable.

B. Transfer and Servicing of Financial Assets

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

C. Wash Sales

Not Applicable.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

Not Applicable.

B. ASC Plans

Not Applicable.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

- (1) The Company records no revenue explicitly attributable to the cost share and reinsurance components of its Medicare or other similarly structured cost based reimbursement contracts.
- (2) As of September 30, 2015, the Company has recorded a receivable from CMS of \$16,595,714 related to the cost share and reinsurance components of administered Medicare products. The Company does not have any additional receivables greater than 10% of the Company’s accounts receivable from uninsured accident and health plans or \$10,000.
- (3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company’s Medicare or other similarly structured cost based reimbursement contracts, the Company has recorded no allowances and reserves for adjustment of recorded revenues and receivables.
- (4) The Company has made no adjustment to revenue resulting from audit of receivables related to revenues recorded in the prior period.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not Applicable.

20. Fair Value Measurements

A. (1) The fair value of financial assets at September 30, 2015 were as follows:

	Level 1	Level 2	Level 3	Total
a. Assets at fair value				
Bonds				
U.S. governments	\$ -	\$ -	\$ -	\$ -
Tax-exempt municipal	-	-	-	-
Residential mortgage-backed	-	-	-	-
Corporate debt securities	-	334,638	-	334,638
Total bonds	-	334,638	-	334,638
Total assets at fair value	\$ -	\$ 334,638	\$ -	\$ 334,638
b. Liabilities at fair value	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -

The Company reports transfers between Level 1 and Level 2 of the fair value hierarchy levels at the end of the reporting period. There were no transfers between Level 1 and Level 2 of the fair value hierarchy between December 31, 2014 and September 30, 2015.

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

Not Applicable.

- (3) The Company reports transfers into or out of Level 3 of the fair value hierarchy levels at the end of the reporting period. There were no transfers into or out of Level 3 of the fair value hierarchy levels between December 31, 2014 and September 30, 2015.
- (4) Fair value of actively traded debt securities are based on quoted market prices. Fair value of other debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates generally using a market valuation approach, or, less frequently, an income valuation approach and are generally classified as Level 2. The Company generally obtains one quoted price for each security from a third party pricing service. These prices are generally derived from recently reported trades for identical or similar securities, including adjustments through the reporting date based upon observable market information. When quoted prices are not available, the third party pricing service may use quoted market prices of comparable securities or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include benchmark yields, reported trades, credit spreads, broker quotes, default rates and prepayment speeds. The Company is responsible for the determination of fair value and as such, the Company performs analysis on the prices received from the third party pricing service to determine whether the prices are reasonable estimates of fair value. The Company’s analysis includes a review of monthly price fluctuations as well as a quarterly comparison of the prices received from the pricing service to prices reported by the Company’s third party investment advisor. Based on the Company’s internal price verification procedures and review of fair value methodology documentation provided by the third party pricing service, there were no material adjustments to the prices obtained from the third party pricing service during the quarter ended September 30, 2015.

NOTES TO THE FINANCIAL STATEMENTS

(5) Derivative Fair Values

Not Applicable.

B. Other Fair Value Disclosures

Not Applicable.

C. Fair Values for All Financial Instruments by Levels 1, 2 and 3

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
Bonds	\$ 334,638	\$ 334,638	\$ -	\$ 334,638	\$ -	\$ -

D. Financial Instruments for which Not Practicable to Estimate Fair Values

Not Applicable.

21. Other Items

A. Extraordinary Items

Not Applicable.

B. Troubled Debt Restructuring: Debtors

Not Applicable.

C. Other Disclosures and Unusual Items

Not Applicable.

D. Business Interruption Insurance Recoveries

Not Applicable.

E. State Transferable and Non-transferable Tax Credits

Not Applicable.

F. Subprime Mortgage Related Risk Exposure

(1) The Company consults with its external investment managers to assess its subprime mortgage related risk exposure. Certain characteristics are utilized to determine if a mortgage-backed security has subprime exposure. The main characteristics reviewed when determining this are the collateral and structure of the security, the loan purpose, loan documentation, occupancy, geographical location, loan size and type. Subprime mortgage borrowers typically have lower credit scores, lower loan balances and higher loan-to-values than other conforming loans. Management’s practices include reviewing quantitative and qualitative credit models that analyze loan-level collateral composition, historical underwriter performance trends, the impact of macroeconomic factors, and issuer risks; as well as reviewing the estimation of security cash flows and monthly model calibrations.

(2) Direct exposure through investments in sub-prime mortgage loans.

The Company has no direct exposure through investment to sub-prime mortgage loans.

(3) Direct exposure through other investments:

- a. Residential mortgage backed securities – No substantial exposure noted.
- b. Commercial mortgage backed securities – No substantial exposure noted.
- c. Collateralized debt obligations – No substantial exposure noted.
- d. Structured securities – No substantial exposure noted.
- e. Equity investment in SCAs – No substantial exposure noted.
- f. Other assets – No substantial exposure noted.
- g. Total – No substantial exposure noted.

(4) Underwriting exposure to sub-prime mortgage risk through Mortgage Guaranty coverage, Financial Guaranty coverage, Directors and Officers liability coverage, or Errors and Omissions liability coverage.

Not Applicable.

Classification of mortgage related securities is primarily based on information from outside data services, including rating agency actions. When considering our exposure, the Company evaluated the percentage of full documentation loans, percent of owner occupied properties, FICO scores, average margin for ARM loans, percent of loans with prepayment penalties, the existence of non-traditional underwriting standards, among other factors.

G. Retained Assets

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

22. Events Subsequent

The Company is not aware of any events or transactions occurring subsequent to the close of the books for this statement which may have a material effect on its financial condition. Subsequent events have been considered through November 11, 2015 for the Statutory Statement issued on November 11, 2015.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

- (1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10.0 percent or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes () No (X)

- (2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10.0 percent or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes () No (X)

Section 2 – Ceded Reinsurance Report – Part A

- (1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes () No (X)

- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$0

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes () No (X)

B. Uncollectible Reinsurance

Not Applicable.

C. Commutation of Ceded Reinsurance

Not Applicable.

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

- A. The Company estimates accrued retrospective premium adjustments for its Medicare business through a mathematical approach using an algorithm based upon settlement procedures defined by contracts with CMS.

The Company estimates accrued retrospective premium adjustments for its Commercial business based on experience to date, knowledge of the marketplace, and the terms of the risk corridors program with HHS.

- B. The Company records accrued retrospective premium as an adjustment to earned premiums.

- C. The amount of net premiums written by the Company at September 30, 2015 that are subject to retrospective rating features was \$522,352,603, or 100.00% of the total net premiums written. No other net premiums written by the Company are subject to retrospective rating features.

STATEMENT AS OF September 30, 2015 OF Humana Benefit Plan of Illinois, Inc.

NOTES TO THE FINANCIAL STATEMENTS

D. Medical loss ratio rebates required pursuant to the Public Health Service Act

	Individual	Small Group Employer	Large Group Employer	Other Categories with rebates	Total
Prior Reporting Year:					
Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
Medical loss ratio rebates paid	-	-	-	-	-
Medical loss rebates unpaid	-	-	-	-	-
Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	-
Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	-
Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -
Current Reporting Year-to-date:					
Medical loss ratio rebates incurred	\$ -	\$ -	\$ 196	\$ -	\$ 196
Medical loss ratio rebates paid	-	-	-	-	-
Medical loss rebates unpaid	-	-	196	-	196
Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	-
Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	-
Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 196

E. Risk Sharing Provisions of the Affordable Care Act

Not Applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2014 were \$24,471,562. As of September 30, 2015, \$21,595,913 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$864,038 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$2,011,611 favorable prior-year development since December 31, 2014. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. The Company did not experience any material prior year claim development on retrospectively rated policies.

26. Intercompany Pooling Arrangements

Not Applicable.

27. Structured Settlements

The Company has no structured settlements.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimate Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More than 181 Days after Billing
12/31/2015	\$ -	\$ -	\$ -	\$ -	\$ -
9/30/2015	7,917,303	7,917,303	-	-	-
6/30/2015	6,123,535	6,123,535	6,115,745	-	-
3/31/2015	3,884,247	3,884,247	3,880,383	-	-
12/31/2014	1,672,304	1,672,304	1,661,273	-	-
9/30/2014	1,628,436	1,628,436	1,620,657	-	-
6/30/2014	1,961,195	1,961,195	1,943,024	11,986	6,073
3/31/2014	1,637,771	1,637,771	1,603,872	26,553	7,345
12/31/2013	742,858	742,858	734,352	7,959	547
9/30/2013	759,184	759,184	757,792	-	1,392
6/30/2013	705,947	705,947	705,947	-	-
3/31/2013	1,023,922	1,023,922	1,022,786	-	1,136

B. Risk Sharing Receivables

Not Applicable.

29. Participating Policies

The Company has no participating policies.

30. Premium Deficiency Reserves

Not Applicable.

31. Anticipated Salvage and Subrogation

Not Applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☒ No ☐

1.2

If yes, has the report been filed with the domiciliary state?

Yes ☒ No ☐

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒

2.2

If yes, date of change:

3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes ☒ No ☐

3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒

3.3

If the response to 3.2 is yes, provide a brief description of those changes.

4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒

4.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes ☐ No ☒ N/A ☐

6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2010

6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2010

6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

07/21/2012

6.4

By what department or departments?
Illinois Department of Insurance

6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☒ No ☐ N/A ☐

6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☒ No ☐ N/A ☐

7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒

7.2

If yes, give full information:

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ☐ No ☒

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☐ No ☒

8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity; (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and (e) Accountability for adherence to the code.

Yes ☒ No ☐
- 9.11

If the response to 9.1 is No, please explain:
- 9.2

Has the code of ethics for senior managers been amended?

Yes ☒ No ☐
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
Revised based on general policy and regulatory changes
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes ☐ No ☒
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes ☒ No ☐
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$1,301,677

INVESTMENT

- 11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes ☐ No ☒
- 11.2

If yes, give full and complete information relating thereto:
12.

Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$0
13.

Amount of real estate and mortgages held in short-term investments:

\$0
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes ☐ No ☒
- 14.2

If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$0	\$0
14.22 Preferred Stock	\$0	\$0
14.23 Common Stock	\$0	\$0
14.24 Short-Term Investments	\$0	\$0
14.25 Mortgage Loans on Real Estate	\$0	\$0
14.26 All Other	\$0	\$0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$0	\$0
- 15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes ☐ No ☒
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
If no, attach a description with this statement.

Yes ☐ No ☐

GENERAL INTERROGATORIES

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

16.3 Total payable for securities lending reported on the liability page.
- \$

\$

\$
- 0

0

0

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?
- Yes
- [X]
- No
- []

- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase	4 Metro Tech Center, 16th Floor Mail Code: NY1-C512, Brooklyn, NY 11245, Attn: Barbara J. Walsh

- 17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?
- Yes
- []
- No
- [X]

- 17.4 If yes, give full information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

- 17.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
107105.00	Blackrock, Inc.	55 East 52nd Street, New York, NY 10055

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?
- Yes
- [X]
- No
- []

- 18.2 If no, list exceptions:
- N/A

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:
- 1.1 A&H loss percent

90.7 %
- 1.2 A&H cost containment percent

3.3 %
- 1.3 A&H expense percent excluding cost containment expenses

8.3 %
- 2.1 Do you act as a custodian for health savings accounts?

Yes [] No [X]
- 2.2 If yes, please provide the amount of custodial funds held as of the reporting date

\$0
- 2.3 Do you act as an administrator for health savings accounts?

Yes [] No [X]
- 2.4 If yes, please provide the balance of the funds administered as of the reporting date

\$0

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Humana Benefit Plan of Illinois, Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

[illegible]

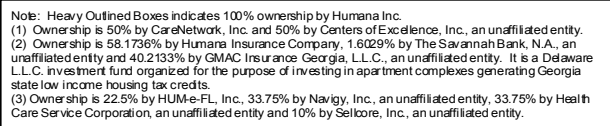
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

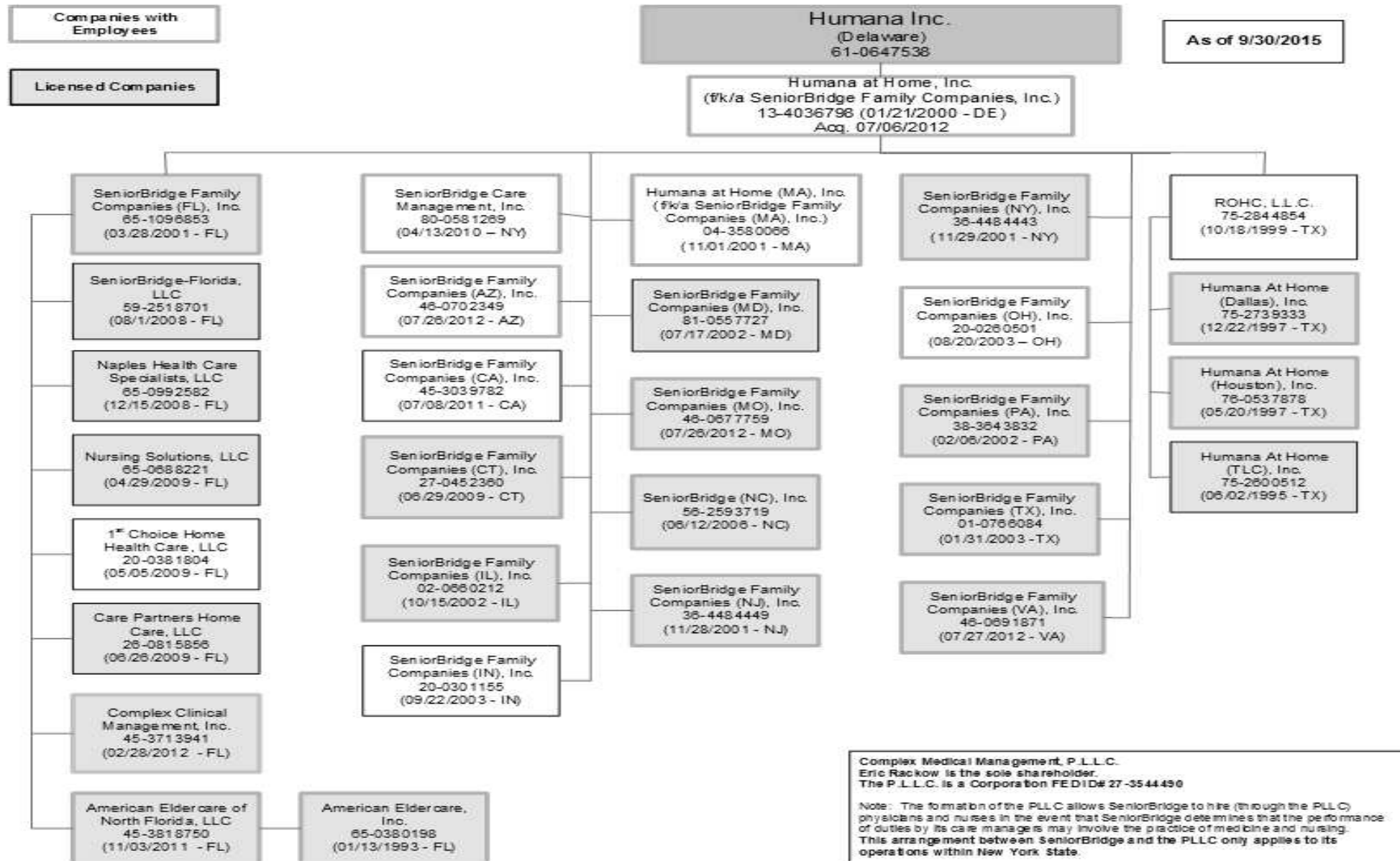
		1	Direct Business Only							
States, etc.		Active Status	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama	AL	L	0	4,172,425	0	0	0	4,172,425	0
2.	Alaska	AK	L	0	0	0	0	0	0	0
3.	Arizona	AZ	L	0	0	0	0	0	0	0
4.	Arkansas	AR	L	0	0	0	0	0	0	0
5.	California	CA	N	0	0	0	0	0	0	0
6.	Colorado	CO	L	0	0	0	0	0	0	0
7.	Connecticut	CT	L	0	0	0	0	0	0	0
8.	Delaware	DE	L	0	0	0	0	0	0	0
9.	District of Columbia	DC	L	0	0	0	0	0	0	0
10.	Florida	FL	N	0	0	0	0	0	0	0
11.	Georgia	GA	L	0	7,210,717	0	0	0	7,210,717	0
12.	Hawaii	HI	L	0	0	0	0	0	0	0
13.	Idaho	ID	L	0	0	0	0	0	0	0
14.	Illinois	IL	L	0	123,314,355	0	4,981,040	0	128,295,395	0
15.	Indiana	IN	L	0	30,422,531	0	0	0	30,422,531	0
16.	Iowa	IA	L	0	0	0	0	0	0	0
17.	Kansas	KS	L	0	0	0	0	0	0	0
18.	Kentucky	KY	L	0	133,586,025	0	0	0	133,586,025	0
19.	Louisiana	LA	L	0	5,062,968	0	0	0	5,062,968	0
20.	Maine	ME	L	0	76,096	0	0	0	76,096	0
21.	Maryland	MD	L	0	0	0	0	0	0	0
22.	Massachusetts	MA	L	0	0	0	0	0	0	0
23.	Michigan	MI	L	0	0	0	0	0	0	0
24.	Minnesota	MN	L	0	0	0	0	0	0	0
25.	Mississippi	MS	L	0	0	0	0	0	0	0
26.	Missouri	MO	L	0	0	0	0	0	0	0
27.	Montana	MT	L	0	2,224,846	0	0	0	2,224,846	0
28.	Nebraska	NE	L	0	0	0	0	0	0	0
29.	Nevada	NV	L	0	0	0	0	0	0	0
30.	New Hampshire	NH	L	0	0	0	0	0	0	0
31.	New Jersey	NJ	L	0	9,996,491	0	0	0	9,996,491	0
32.	New Mexico	NM	L	0	0	0	0	0	0	0
33.	New York	NY	N	0	0	0	0	0	0	0
34.	North Carolina	NC	L	0	16,214,236	0	0	0	16,214,236	0
35.	North Dakota	ND	L	11,509	0	0	0	0	11,509	0
36.	Ohio	OH	N	0	0	0	0	0	0	0
37.	Oklahoma	OK	L	0	0	0	0	0	0	0
38.	Oregon	OR	L	0	0	0	0	0	0	0
39.	Pennsylvania	PA	L	0	129,518,684	0	0	0	129,518,684	0
40.	Rhode Island	RI	L	0	0	0	0	0	0	0
41.	South Carolina	SC	L	0	7,003,551	0	0	0	7,003,551	0
42.	South Dakota	SD	L	0	0	0	0	0	0	0
43.	Tennessee	TN	L	0	0	0	0	0	0	0
44.	Texas	TX	L	0	0	0	0	0	0	0
45.	Utah	UT	N	0	0	0	0	0	0	0
46.	Vermont	VT	L	0	0	0	0	0	0	0
47.	Virginia	VA	L	0	0	0	0	0	0	0
48.	Washington	WA	L	0	0	0	0	0	0	0
49.	West Virginia	WV	L	0	48,750,335	0	0	0	48,750,335	0
50.	Wisconsin	WI	L	0	0	0	0	0	0	0
51.	Wyoming	WY	L	0	0	0	0	0	0	0
52.	American Samoa	AS	N	0	0	0	0	0	0	0
53.	Guam	GU	N	0	0	0	0	0	0	0
54.	Puerto Rico	PR	N	0	0	0	0	0	0	0
55.	U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0
56.	Northern Mariana Islands	MP	N	0	0	0	0	0	0	0
57.	Canada	CAN	N	0	0	0	0	0	0	0
58.	Aggregate Other Aliens	OT	XXX	0	0	0	0	0	0	0
59.	Subtotal	XXX	11,509	517,553,260	0	4,981,040	0	0	522,545,809	0
60.	Reporting Entity Contributions for Employee Benefit Plans	XXX	0	0	0	0	0	0	0	0
61.	Totals (Direct Business)	(a) 46	11,509	517,553,260	0	4,981,040	0	0	522,545,809	0
DETAILS OF WRITE-INS										
58001.	.....	XXX								
58002.	.....	XXX								
58003.	.....	XXX								
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.
(a) Insert the number of L responses except for Canada and Other Alien.

15

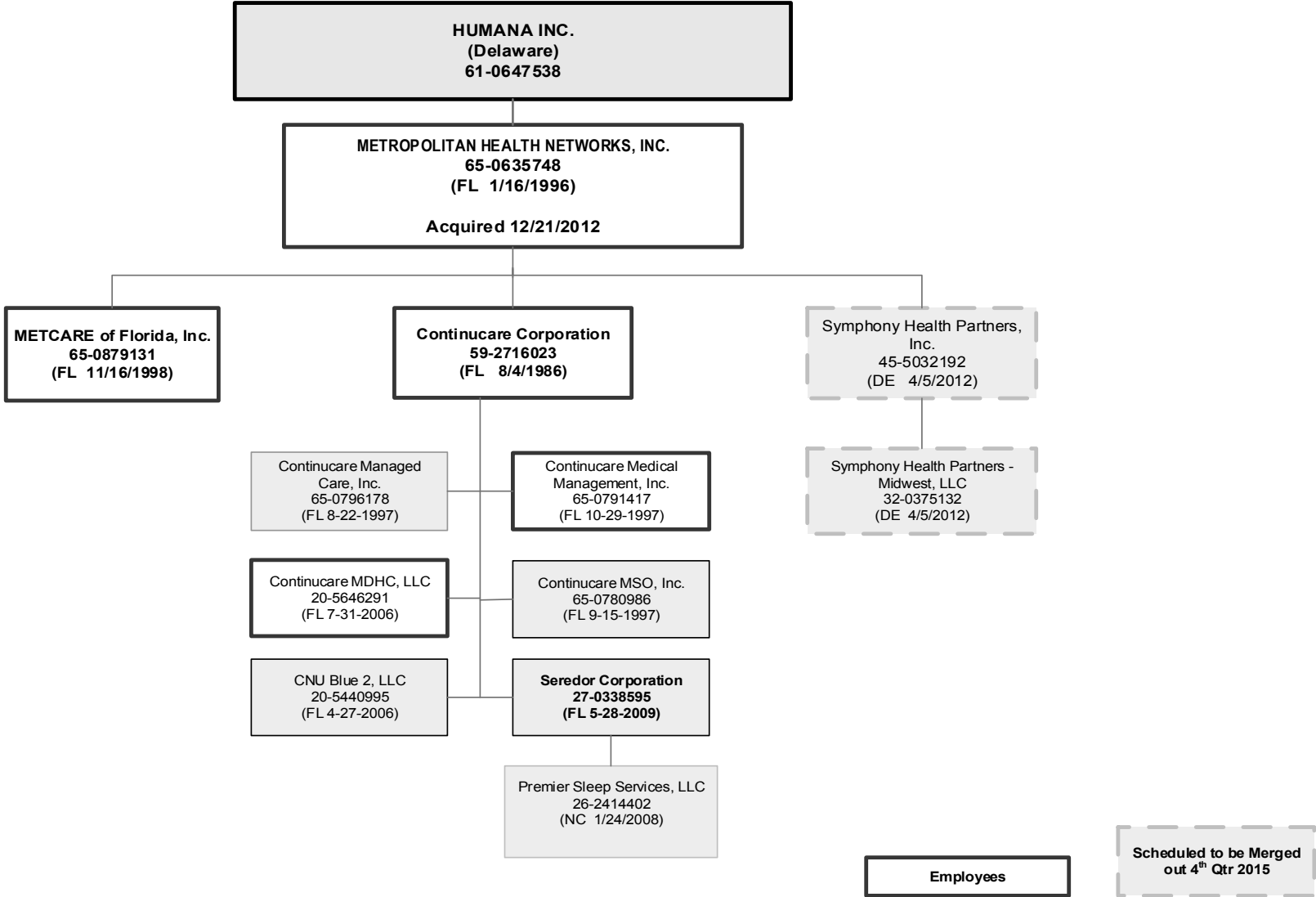


STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Humana Benefit Plan of Illinois, Inc.



STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Humana Benefit Plan of Illinois, Inc.

As of 9-30-2015



STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Humana Benefit Plan of Illinois, Inc.

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0119	Humana Inc.	00000	65-0851053				154th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-0381804				1st Choice Home Health Care, LLC	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5309363				515-526W MainSt CondoCouncil of Co-Owners	KY	NIA	Preservation on Main, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0293220				54th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3818750				American Eldercare of North Florida, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0380198				American Eldercare, Inc.	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12151	20-1001348				Arcadian Health Plan, Inc.	WA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-0836599				Arcadian Management Services, Inc.	DE	NIA	Arcadian Management Services, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-3715944				Availity, L.L.C.	DE	OTH	See Footnote 1	Board of Directors	0.000	Humana Inc.	1
0119	Humana Inc.	00000	30-0117876				CAC Medical Center Holdings, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-0010657				CAC-Florida Medical Centers, LLC	FL	NIA	Humana Inc. SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-0815856				Care Partners Home Care, LLC	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	39-1514846				CareNetwork, Inc.	WI	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95092	59-2598550				CarePlus Health Plans, Inc.	FL	NIA	CPHP Holdings, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95754	62-1579044				Cariten Health Plan Inc.	TN	IA	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95158	61-1279717				CHA HMO, Inc.	KY	IA	CHA Service Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1279716				CHA Service Company	KY	NIA	Humana Health Plan, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5440995				CNU Blue 2, LLC	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	52015	59-2531815				CompBenefits Company	FL	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	04-3185995				CompBenefits Corporation	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	11228	36-3686002				CompBenefits Dental, Inc.	IL	IA	Dental Care Plus Management Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	58-2228851				CompBenefits Direct, Inc.	DE	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60984	74-2552026				CompBenefits Insurance Company	TX	IA	Humana Dental Company SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3713941				Complex Clinical Management, Inc.	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	42-1575099				Comprehensive Health Insights, Inc.	IL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-2716023				Continucare Corporation	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0796178				Continucare Managed Care, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5646291				Continucare MDHC, LLC	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0791417				Continucare Medical Management, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0780986				Continucare MSO, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-8236655				Corphealth Provider Link, Inc.	TX	NIA	Corphealth, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	75-2043865				Humana Behavioral Health, Inc.	TX	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	33-0916248				DefenseWeb Technologies, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	36-3512545				Dental Care Plus Management Corp.	IL	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95161	76-0039628				DentiCare, Inc.	TX	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	88595	31-0935772				Emphesys Insurance Company	TX	IA	Emphesys, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1237697				Emphesys, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-1649291				Harris, Rothenberg International Inc.	NY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1223418				Health Value Management, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-4912173				HRI Humana of California Inc.	CA	NIA	Harris, Rothenberg International Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3592783				HUM INT, LLC	DE	NIA	HUM-Holdings International, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-4835394				Humana Active Outlook, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	75-2739333				Humana At Home (Dallas), Inc.	TX	NIA	ROHC, L.L.C.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	76-0537878				Humana At Home (Houston), Inc.	TX	NIA	ROHC, L.L.C.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	04-3580066				Humana at Home (MA), Inc.	MA	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0274594				Humana At Home 1, Inc.	FL	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	*
0119	Humana Inc.	00000	13-4036798				Humana at Home, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60052	37-1326199				Humana Benefit Plan of Illinois, Inc.	IL	RE	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-1843760				Humana Dental Company	FL	NIA	CompBenefits Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	52028	36-3654697				Humana Dental Concern, Ltd.	IL	IA	HumanaDental, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95519	58-2209549				Humana Employers Health Plan of GA, Inc.	GA	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1241225				Humana Government Business, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95642	72-1279235				Humana Health Benefit Plan of LA, Inc.	LA	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	13558	26-2800286				Humana Health Company of New York, Inc.	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	69671	61-1041514				Humana Health Ins. Co. of Florida, Inc.	FL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3473328				Humana Health Plan of California, Inc.	CA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95348	31-1154200				Humana Health Plan of Ohio, Inc.	OH	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95024	61-0994632				Humana Health Plan of Texas, Inc.	TX	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95885	61-1013183				Humana Health Plan, Inc.	KY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95721	66-0406896				Humana Health Plans of Puerto Rico, Inc.	PR	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-0647538		NYSE		Humana Inc.	DE	UDP		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1343791				Humana Innovation Enterprises, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	73288	39-1263473				Humana Insurance Company	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60219	61-1311685				Humana Insurance Company of Kentucky	KY	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12634	20-2888723				Humana Insurance Company of New York	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	84603	66-0291866				Humana Insurance of Puerto Rico, Inc.	PR	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-3364857				Humana MarketPOINT of Puerto Rico, Inc.	PR	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1343508				Humana MarketPOINT, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	14224	27-3991410				Humana Medical Plan of Michigan, Inc.	MI	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	14462	27-4660531				Humana Medical Plan of Pennsylvania, Inc.	PA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12908	20-8411422				Humana Medical Plan of Utah, Inc.	UT	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95270	61-1103898				Humana Medical Plan, Inc.	FL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-2254346				Humana Pharmacy Solutions, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1316926				Humana Pharmacy, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12282	20-2036444				Humana Regional Health Plan, Inc.	AR	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-8418853				Humana Veterans Healthcare Services, Inc.	DE	NIA	Humana Government Business, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-4522426				Humana WellWorks LLC	DE	NIA	Health Value Management, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95342	39-1525003				Humana Wisc. Health Org. Ins. Corp.	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	70580	39-0714280				HumanaDental Insurance Company	WI	IA	HumanaDental, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1364005				HumanaDental, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-4535747				HumanaVitality, LLC	DE	NIA	HumanaWellworks LLC	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1239538				Humco, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1383567				HUM-e-FL, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3583438				HUM-Holdings International, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-1050795				Hummingbird Coaching Systems LLC	OH	NIA	Corphealth, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	39-1769093				Independent Care Health Plan	WI	OTH	See Footnote 2	Other	100.000	Humana Inc.	2
0119	Humana Inc.	65110	57-0380426				Kanawha Insurance Company	SC	IA	KMG America Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-1377270				KMG America Corporation	VA	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1232669				Managed Care Indemnity, Inc.	VT	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0879131				METCARE of Florida, Inc.	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0635728				Metropolitan Health Networks, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0992582				Naples Health Care Specialists, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0688221				Nursing Solutions, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	62-1552091				PHP Companies, Inc.	TN	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	62-1250945				Preferred Health Partnership, Inc.	TN	NIA	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	0

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	*
...0119 ...	Humana Inc. ....	...00000 ...	20-1724127 .....	.....	.....	.....	Preservation on Main, Inc. ....	...KY.....	...NIA.....	Humana Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-1225873 .....	.....	.....	.....	Primary Care Holdings, Inc. ....	...DE.....	...NIA.....	Humana Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	75-2844854 .....	.....	.....	.....	ROHC, L.L.C. ....	...TX.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	56-2593719 .....	.....	.....	.....	SeniorBridge (NC), Inc. ....	...NC.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	80-0581269 .....	.....	.....	.....	SeniorBridge Care Management, Inc. ....	...NY.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-0702349 .....	.....	.....	.....	SeniorBridge Family Companies (AZ), Inc. ....	...AZ.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	45-3039782 .....	.....	.....	.....	SeniorBridge Family Companies (CA), Inc. ....	...CA.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	27-0452360 .....	.....	.....	.....	SeniorBridge Family Companies (CT), Inc. ....	...CT.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	65-1096853 .....	.....	.....	.....	SeniorBridge Family Companies (FL), Inc. ....	...FL.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	02-0660212 .....	.....	.....	.....	SeniorBridge Family Companies (IL), Inc. ....	...IL.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	20-0301155 .....	.....	.....	.....	SeniorBridge Family Companies (IN), Inc. ....	...IN.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	81-0557727 .....	.....	.....	.....	SeniorBridge Family Companies (MD), Inc. ....	...MD.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-0677759 .....	.....	.....	.....	SeniorBridge Family Companies (MO), Inc. ....	...MO.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	36-4484449 .....	.....	.....	.....	SeniorBridge Family Companies (NJ), Inc. ....	...NJ.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	36-4484443 .....	.....	.....	.....	SeniorBridge Family Companies (NY), Inc. ....	...NY.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	20-0260501 .....	.....	.....	.....	SeniorBridge Family Companies (OH), Inc. ....	...OH.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	38-3643832 .....	.....	.....	.....	SeniorBridge Family Companies (PA), Inc. ....	...PA.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	01-0766084 .....	.....	.....	.....	SeniorBridge Family Companies (TX), Inc. ....	...TX.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-0691871 .....	.....	.....	.....	SeniorBridge Family Companies (VA), Inc. ....	...VA.....	...NIA.....	Humana at Home, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	59-2518701 .....	.....	.....	.....	SeniorBridge-Florida, LLC ....	...FL.....	...NIA.....	SeniorBridge Family Companies (FL), Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	27-0338595 .....	.....	.....	.....	Seredor Corporation ....	...FL.....	...NIA.....	Continucare Corporation	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	86-0597187 .....	.....	.....	.....	St. Mary's Medical Park Pharmacy, Inc. ....	...AZ.....	...NIA.....	Humana Pharmacy, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	32-0375132 .....	.....	.....	.....	Symphony Health Partners - Midwest, LLC ....	...DE.....	...NIA.....	See Footnote 3	Ownership .....	...0.000	Humana Inc. ....	....3
...0119 ...	Humana Inc. ....	...00000 ...	45-5032192 .....	.....	.....	.....	Symphony Health Partners, Inc. ....	...DE.....	...NIA.....	Metropolitan Health Networks, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	74-2352809 .....	.....	.....	.....	Texas Dental Plans, Inc. ....	...TX.....	...NIA.....	Humana Dental Company	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...54739 ...	52-1157181 .....	.....	.....	.....	The Dental Concern, Inc. ....	...KY.....	...IA.....	HumanaDental, Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	75-2600512 .....	.....	.....	.....	Humana at Home (TLC), Inc. ....	...TX.....	...NIA.....	ROHC, L.L.C.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	80-0072760 .....	.....	.....	.....	Transcend Insights, Inc. ....	...DE.....	...NIA.....	Humana Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-5329373 .....	.....	.....	.....	Transcend, LLC ....	...DE.....	...NIA.....	Humana Inc.	Ownership .....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	75-2043865 .....	.....	.....	.....	Humana Behavioral Health, Inc. ....	...TX.....	...IA.....	Humana Inc.	Ownership .....	...100.000	Humana Inc. ....	....0

Asterisk	Explanation
1	Availity, L.L.C., a Delaware limited liability company, was formed by affiliates of Humana Inc. and Blue Cross and Blue Shield of Florida, Inc. to develop and operate an Internet site on the World Wide Web to permit health plans to communicate and engage in electronic transactions with health care service providers initially in the State of Florida. HUM-e-FL, Inc., a subsidiary of Humana Inc., is a Member with a 22.5% ownership interest. Navigy, Inc., a subsidiary of Blue Cross and Blue Shield of Florida, Inc., is a Member with a 33.75% ownership interest, Health Care Service Corporation, a Member, has a 33.75% ownership interest, and Sellcore, Inc., a subsidiary of WellPoint and a Member, has a 10% ownership interest.
2	Independent Care Health Plan, a Wisconsin corporation licensed as an HMO, operates an integrated, coordinated medical and social service managed care program for chronically disabled Medicaid recipients in Milwaukee, Wisconsin. CareNetwork, Inc. owns 50% of the company's stock. Centers of Excellence, Inc. owns the other 50%.
3	Ownership is 80% Symphony Health Partners, Inc. and 20% Humana Inc. of Symphony Health Partners Midwest, LLC.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

Response

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

NO

Explanation:

1. This type of business is not written.

Bar Code:

1. Medicare Part D Coverage Supplement [Document Identifier 365]



OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

		Current Statement Date			4 Prior Year Net Admitted Assets
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
2504.	Deposits	75,536	75,536	0	0
2505.	Federal Contingency Reserves	37,203	0	37,203	24,969
2506.	Prepaid Expenses	24,779	24,779	0	0
2597.	Summary of remaining write-ins for Line 25 from overflow page	137,518	100,315	37,203	24,969

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		
5. Deduct amounts received on disposals		
6. Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other than temporary impairment recognized		
8. Deduct current year's depreciation		
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	1	2
	Year to Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest point and commitment fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other than temporary impairment recognized		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and depreciation		
9. Total foreign exchange change in book/adjusted carrying value		
10. Deduct current year's other than temporary impairment recognized		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	52,778,680	50,475,922
2. Cost of bonds and stocks acquired	48,152,126	29,962,700
3. Accrual of discount	7,878	222,103
4. Unrealized valuation increase (decrease)	(35,363)	965
5. Total gain (loss) on disposals	651,351	126,325
6. Deduct consideration for bonds and stocks disposed of	29,723,433	27,669,418
7. Deduct amortization of premium	361,147	339,917
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	71,470,092	52,778,680
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	71,470,092	52,778,680

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	80,152,729	457,085,793	388,728,916	(18,522)	82,250,086	80,152,729	148,491,084	46,829,921
2. NAIC 2 (a)	6,718,502	633,626	1,350,390	(132,799)	7,338,493	6,718,502	5,868,939	8,632,511
3. NAIC 3 (a)	326,378	510,000	0	(1,782)	326,562	326,378	834,596	627,742
4. NAIC 4 (a)	225,000	0	0	(33,750)	225,000	225,000	191,250	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	87,422,609	458,229,419	390,079,306	(186,853)	90,140,141	87,422,609	155,385,869	56,090,174
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	87,422,609	458,229,419	390,079,306	(186,853)	90,140,141	87,422,609	155,385,869	56,090,174

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$83,915,777 ; NAIC 2 \$0 ; NAIC 3 \$0 ;
NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
9199999 Totals	43,918,710	xxx	43,922,925	1,345	5,860

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	3,311,494	400,504
2. Cost of short-term investments acquired	566,027,680	270,055,784
3. Accrual of discount	0	0
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	525,416,250	267,144,794
7. Deduct amortization of premium	4,214	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	43,918,710	3,311,494
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	43,918,710	3,311,494

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards
N O N E

Schedule DB - Part B - Verification - Futures Contracts
N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open
N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open
N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives
N O N E

SCHEDULE E - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of cash equivalents acquired	452,982,296	233,496,489
3. Accrual of discount	11,467	3,426
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	(198)	(15)
6. Deduct consideration received on disposals	412,996,498	233,499,900
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	39,997,067	0
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	39,997,067	0

Schedule A - Part 2 - Real Estate Acquired and Additions Made
N O N E

Schedule A - Part 3 - Real Estate Disposed
N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made
N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid
N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made
N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid
N O N E

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Humana Benefit Plan of Illinois, Inc.

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
36179R-LP-2	GOVERNMENT NATIONAL MORTGAGE GNMA		08/25/2015	CREDIT SUISSE FIRST BOSTON CORP.		833,448	798,364	1,552	1
0599999. Subtotal - Bonds - U.S. Governments						833,448	798,364	1,552	XXX
246381-DH-7	DELAWARE STATE MUNI		08/18/2015	BARCLAYS CAPITAL		221,969	195,000	4,604	1FE
246381-ET-0	DELAWARE STATE MUNI		08/03/2015	BARCLAYS CAPITAL		138,077	120,000	583	1FE
246381-FA-0	DELAWARE STATE MUNI		09/24/2015	BARCLAYS CAPITAL		657,909	590,000	7,211	1FE
349425-SW-4	FORT WORTH TEX MUNI		08/04/2015	CITIGROUP GLOBAL MARKETS INC		170,671	140,000	0	1FE
373384-X9-2	GEORGIA ST MUNI		08/05/2015	WELLS FARGO		313,905	290,000	1,249	1FE
467578-H6-8	JACKSON CNTY MO SPL OBLIG MUNI		08/03/2015	WELLS FARGO		115,490	100,000	903	1FE
56052A-YE-0	MAINE ST MUNI		09/01/2015	LOOP CAPITAL MARKETS		80,762	75,000	719	1FE
574193-GT-9	MARYLAND ST MUNI		08/18/2015	CITIGROUP GLOBAL MARKETS INC		151,020	130,000	3,069	1FE
57583P-GD-5	MASSACHUSETTS ST FED HWY MUNI		08/04/2015	BARCLAYS CAPITAL		174,397	145,000	1,047	1FE
646066-GY-0	NEW JERSEY ST EDL FACS AUTH RE		08/03/2015	MERRILL LYNCH		123,162	110,000	1,238	1FE
64966L-U8-2	NEW YORK NY MUNI		08/03/2015	MERRILL LYNCH, PIERCE, FENNER & SM		244,001	225,000	0	1FE
662903-PT-4	NORTH TEX MUN WTR DIST TEX WTR		08/04/2015	BARCLAYS CAPITAL		210,096	175,000	2,722	1FE
677521-PJ-9	OHIO ST MUNI		08/04/2015	WELLS FARGO		73,660	70,000	1,381	1FE
688443-S7-6	OSSEO MINN INDPST SCH DIST NO 2		08/03/2015	CITIGROUP GLOBAL MARKETS INC		85,059	75,000	938	1FE
840610-RP-6	SOUTH WASHINGTON CNTY INDPST SC		08/03/2015	WELLS FARGO		68,025	60,000	758	1FE
914378-HW-7	UNIVERSITY KY GEN RCPTS MUNI		08/03/2015	CITIGROUP GLOBAL MARKETS INC		86,543	75,000	1,156	1FE
917542-TK-8	UTAH ST MUNI		08/11/2015	BARCLAYS CAPITAL		86,174	75,000	448	1FE
928172-K9-5	VIRGINIA ST PUB BLDG AUTH PUB MUNI		09/02/2015	LOOP CAPITAL MARKETS		146,187	135,000	1,669	1FE
93978H-ME-2	WASHINGTON ST HEALTH CARE FAC MUNI		08/07/2015	MORGAN STANLEY		145,714	130,000	2,365	1FE
1799999. Subtotal - Bonds - U.S. States, Territories and Possessions						3,292,821	2,915,000	32,060	XXX
239019-P4-8	DAVIS CNTY UTAH SCH DIST MUNI		08/12/2015	HUTCH SHOCKLY ERLEY		70,034	60,000	0	1FE
239019-P7-1	DAVIS CNTY UTAH SCH DIST MUNI		08/12/2015	HUTCH SHOCKLY ERLEY		72,686	60,000	0	1FE
239019-P8-9	DAVIS CNTY UTAH SCH DIST MUNI		08/12/2015	HUTCH SHOCKLY ERLEY		85,726	70,000	0	1FE
254764-JW-4	DISTRICT COLUMBIA MUNI		08/14/2015	GOLDMAN SACHS		73,026	65,000	0	1FE
254764-JX-2	DISTRICT COLUMBIA MUNI		08/14/2015	GOLDMAN SACHS		72,728	65,000	0	1FE
259327-K9-4	DOUGLAS CNTY SCH DIST MUNI		09/01/2015	LOOP CAPITAL MARKETS		79,527	75,000	658	1FE
3138EK-GU-3	FED NTL MTG ASSO FNMA		07/30/2015	MERRILL LYNCH		177,121	162,963	244	1
3138EN-Y9-4	FED NTL MTG ASSO FNMA		07/30/2015	GOLDMAN SACHS		828,153	773,072	1,031	1
3138EP-AH-7	FED NTL MTG ASSO FNMA		07/31/2015	J.P. MORGAN		805,438	742,125	1,113	1
3138EP-LC-6	FED NTL MTG ASSO FNMA		07/30/2015	MERRILL LYNCH		645,228	593,654	890	1
3138EP-S4-7	FED NTL MTG ASSO FNMA		08/04/2015	GOLDMAN SACHS		412,959	387,130	516	1
3138EP-TZ-7	FED NTL MTG ASSO FNMA		08/25/2015	CREDIT SUISSE FIRST BOSTON CORP.		1,009,853	966,945	1,289	1
3138W9-KQ-2	FED NTL MTG ASSO FNMA		07/30/2015	J.P. MORGAN		57,349	57,108	57	1
3138WE-CQ-0	FED NTL MTG ASSO FNMA		08/24/2015	GOLDMAN SACHS		1,060,629	979,513	1,415	1
31418A-VS-4	FED NTL MTG ASSO FNMA		07/30/2015	J.P. MORGAN		761,832	758,631	759	1
349515-TG-1	FORT WORTH TEX WTR & SWR REV MUNI		08/04/2015	BARCLAYS CAPITAL		103,785	85,000	0	1FE
349515-TH-9	FORT WORTH TEX WTR & SWR REV MUNI		08/04/2015	BARCLAYS CAPITAL		181,031	150,000	0	1FE
349515-TJ-5	FORT WORTH TEX WTR & SWR REV MUNI		08/04/2015	BARCLAYS CAPITAL		107,864	90,000	0	1FE
373384-Y6-7	GEORGIA ST MUNI		09/01/2015	LOOP CAPITAL MARKETS		63,836	60,000	458	1FE
495289-SY-7	KING COUNTY SWEER REV MUNI		08/26/2015	LOOP CAPITAL MARKETS		128,508	115,000	1,029	1FE
508248-BC-4	LAKE CNTY FLA CAP IMPT REV MUNI		08/13/2015	J.P. MORGAN		274,852	255,000	2,727	1FE
508248-BD-2	LAKE CNTY FLA CAP IMPT REV MUNI		08/13/2015	J.P. MORGAN		280,241	260,000	2,781	1FE
58259Y-3Q-0	METROPOLITAN TRANSN AUTH NY REV F		08/07/2015	BARCLAYS CAPITAL		127,643	115,000	1,390	1FE
60412A-CZ-4	MINNESOTA ST FOR PREVIOUS ISSU		08/11/2015	MERRILL LYNCH		109,044	95,000	0	1FE
60412A-DT-7	MINNESOTA ST FOR PREVIOUS ISSU		08/05/2015	CITIGROUP GLOBAL MARKETS INC		205,795	190,000	0	1FE
60412A-DV-2	MINNESOTA ST FOR PREVIOUS ISSU		08/25/2015	WELLS FARGO		143,675	125,000	156	1FE
60412A-EA-7	MINNESOTA ST FOR PREVIOUS ISSU		09/17/2015	CITIGROUP GLOBAL MARKETS INC		213,764	175,000	802	1FE
60412A-EB-5	MINNESOTA ST FOR PREVIOUS ISSU		08/11/2015	CITIGROUP GLOBAL MARKETS INC		204,582	165,000	0	1FE
646066-GZ-7	NEW JERSEY ST EDL FACS AUTH RE		08/10/2015	CITIGROUP GLOBAL MARKETS INC		109,163	95,000	1,161	1FE
64966L-MX-6	NEW YORK NY MUNI		08/19/2015	MERRILL LYNCH		178,718	165,000	527	1FE
64966L-RC-7	NEW YORK NY MUNI		08/19/2015	MERRILL LYNCH		162,533	150,000	479	1FE
64990A-DH-5	NEW YORK ST DORM AUTH SALES TA		07/23/2015	MORGAN STANLEY		1,071,540	1,000,000	0	1FE
64990A-DO-5	NEW YORK ST DORM AUTH SALES TA		09/17/2015	MORGAN STANLEY		291,314	240,000	233	1FE
64990B-JU-8	NEW YORK ST DORM AUTH REVS MUNI		08/10/2015	CITIGROUP GLOBAL MARKETS INC		83,502	70,000	613	1FE
658196-SH-9	NORTH CAROLINA ESATN MUN PIIR A		08/26/2015	BARCLAYS CAPITAL		95,362	90,000	750	1FE
662903-PU-1	NORTH TEX MUN WTR DIST TEX WTR		08/04/2015	BARCLAYS CAPITAL		77,593	65,000	1,011	1FE
667825-UJ-0	NORTHWEST TEX INDPST SCH DIST MUNI		08/26/2015	WELLS FARGO		90,582	85,000	142	1FE
796253-X4-9	SAN ANTONIO TEX ELEC & GAS RE MUNI		09/01/2015	WELLS FARGO		175,375	165,000	871	1FE
860758-RD-5	STILLWATER MINN INDPST SCH DIST		08/03/2015	PIPER JAFFREY		69,580	60,000	0	1FE
860758-RF-0	STILLWATER MINN INDPST SCH DIST		08/11/2015	WELLS FARGO		77,143	65,000	0	1FE

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Humana Benefit Plan of Illinois, Inc.

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2		3	4	5	6	7	8	9	10
CUSIP Identification	Description		Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Desig- nation or Market Indicator (a)
882723-QE-2	TEXAS ST	MUNI		.07/31/2015	WELLS		290,319	290,000	3,992	1
88283L-JX-5	TX TRANSN COMMN ST HWY FD R	MUNI		.08/13/2015	CITIGROUP GLOBAL MARKETS INC		402,155	325,000	1,174	1
91514A-BK-0	UNIVERSITY TEX UNIV REVS	MUNI		.08/04/2015	LOOP CAPITAL MARKETS		160,339	130,000	3,106	1FE
917567-AY-5	UTAH TRAN AUTHORITY SALES TAX	MUNI		.09/01/2015	BARCLAYS CAPITAL		149,747	130,000	1,426	1FE
924214-UX-5	VERMONT ST MUNI BOND BANK	MUNI		.08/04/2015	CITIGROUP GLOBAL MARKETS INC		91,687	90,000	0	1FE
92778V-BR-8	VIRGINIA COLLEGE BLDG AUTH	MUNI		.08/10/2015	WELLS FARGO		219,604	190,000	0	1FE
3199999. Subtotal - Bonds - U.S. Special Revenues							12,153,165	11,101,141	32,800	XXX
09062X-AF-0	BIOTEN INC	CORPORATE		.09/10/2015	MERRILL LYNCH		104,752	105,000	0	2FE
120111-BN-8	BUILDING MATERIALS CORP	CORPORATE		.09/22/2015	DEUTSCHE BANK		415,000	415,000	0	3FE
12189L-AY-7	BURLINGTON NORTH	CORPORATE		.08/14/2015	VARIOUS		204,401	205,000	0	2FE
151020-AQ-7	CELGENE CORPORATION	CORPORATE		.08/12/2015	VARIOUS		324,472	325,000	18	2FE
235851-AQ-5	DANAHER CORPORATION	CORPORATE		.09/10/2015	CITIGROUP GLOBAL MARKETS INC		44,936	45,000	0	1FE
25468P-DF-0	THE WALT DISNEY COMPANY	CORPORATE		.09/14/2015	GOLDMAN SACHS		244,417	245,000	0	1FE
26442U-AA-2	DUKE ENERGY PROGRESS INC	CORPORATE		.08/10/2015	WELLS FARGO		373,856	375,000	0	1FE
35804G-AK-4	FRESENTUS US FINANCE II INC	CORPORATE		.09/16/2015	GOLDMAN SACHS		95,000	95,000	0	3FE
375558-BF-9	GILEAD SCIENCES INC	CORPORATE		.09/09/2015	J.P. MORGAN		74,697	75,000	0	1FE
40428H-PV-8	HSBC BANK USA	CORPORATE		.08/04/2015	HSBC SECURITIES INC.		824,274	825,000	0	1FE
46625H-MN-7	JP MORGAN CHASE	CORPORATE		.07/14/2015	JP MORGAN CHASE BANK		273,966	275,000	0	1FE
665772-CN-7	NORTHERN STATES POWER	CORPORATE		.08/04/2015	MORGAN STANLEY		98,367	100,000	0	1FE
828807-CJ-9	SIMON PROPERTY GROUP LP	CORPORATE		.08/10/2015	CITIGROUP GLOBAL MARKETS INC		249,858	250,000	0	1FE
87165L-AT-8	SYNCT 15-4:A	ABS FTST		.09/25/2015	BARCLAYS CAPITAL		199,998	200,000	0	1FE
94974B-GM-6	WELLS FARGO & CO	CORPORATE		.07/15/2015	WELLS FARGO		344,807	345,000	0	1FE
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)							3,872,801	3,880,000	18	XXX
8399997. Total - Bonds - Part 3							20,152,235	18,694,505	66,430	XXX
8399998. Total - Bonds - Part 5							XXX	XXX	XXX	XXX
8399999. Total - Bonds							20,152,235	18,694,505	66,430	XXX
8999997. Total - Preferred Stocks - Part 3							0	XXX	0	XXX
8999998. Total - Preferred Stocks - Part 5							XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks							0	XXX	0	XXX
9799997. Total - Common Stocks - Part 3							0	XXX	0	XXX
9799998. Total - Common Stocks - Part 5							XXX	XXX	XXX	XXX
9799999. Total - Common Stocks							0	XXX	0	XXX
9899999. Total - Preferred and Common Stocks							0	XXX	0	XXX
9999999 - Totals							20,152,235	XXX	66,430	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Humana Benefit Plan of Illinois, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Ident-ification	Description	For-eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid-eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn-ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con-tractual Maturity Date	NAIC Design-ation or Market In-dicator (a)
36183W-5Y-4	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		12,283	12,283	13,020	.0	.0	(18)	.0	(18)	.0	12,283	.0	.0	.0	192	01/01/2045	1
36202X-XN-2	GOVERNMENT NATIONAL MORTGAGE	GNMA	09/01/2015	MBS PAYDOWN		44,496	44,496	44,594	44,500	.0	(4)	.0	(4)	.0	44,496	.0	.0	.0	1,487	07/01/2033	1
36225B-Y9-3	GOVERNMENT NATIONAL MORTGAGE	GNMA	09/01/2015	MBS PAYDOWN		12,750	12,750	12,822	12,758	.0	(8)	.0	(8)	.0	12,750	.0	.0	.0	473	07/01/2033	1
0599999	Subtotal - Bonds - U.S. Governments					69,529	69,529	70,436	57,258	0	(30)	0	(30)	0	69,529	0	0	0	2,152	XXX	XXX
041042-ZH-8	ARKANSAS ST	MUNI	08/25/2015	MERRILL LYNCH		321,681	265,000	323,864	323,536	.0	(3,541)	.0	(3,541)	.0	319,995	.0	1,686	1,686	9,827	10/01/2026	1FE
207758-QJ-5	CONNECTICUT ST	MUNI	08/25/2015	CITIGROUP GLOBAL MARKETS		589,590	500,000	615,445	596,522	.0	(7,298)	.0	(7,298)	.0	589,224	.0	366	366	28,958	01/01/2024	1FE
419791-6F-0	HAWAII ST	MUNI	07/28/2015	WELLS FARGO		241,454	200,000	243,684	243,223	.0	(5,384)	.0	(5,384)	.0	237,839	.0	3,615	3,615	6,833	08/01/2023	1FE
574192-6C-9	MARYLAND ST	MUNI	08/01/2015	MATURITY		235,000	235,000	272,816	239,839	.0	(4,839)	.0	(4,839)	.0	235,000	.0	.0	.0	11,750	08/01/2015	1FE
57582P-7C-8	MASSACHUSETTS ST	MUNI	08/03/2015	CITIGROUP GLOBAL MARKETS		676,577	550,000	678,200	675,401	.0	(6,222)	.0	(6,222)	.0	669,179	.0	7,398	7,398	23,833	08/01/2025	1FE
57585K-3F-3	MA ST HLTH & ED - MIT	MUNI	08/03/2015	FIDELITY CAPITAL MARKETS		336,721	275,000	337,343	335,587	.0	(3,912)	.0	(3,912)	.0	331,675	.0	5,046	5,046	15,087	07/01/2023	1FE
604129-4F-0	MINNESOTA ST	MUNI	08/03/2015	DIV OF N		841,589	700,000	851,942	847,060	.0	(10,788)	.0	(10,788)	.0	836,272	.0	5,317	5,317	33,542	08/01/2022	1FE
60636W-OZ-1	MISSOURI ST HIWYS & TRANS COMMN		08/03/2015	CITIGROUP GLOBAL MARKETS		610,520	500,000	616,035	609,960	.0	(6,341)	.0	(6,341)	.0	603,619	.0	6,901	6,901	19,097	05/01/2025	1FE
65829Q-BR-4	NORTH CAROLINA ST LTD OBLIG	MUNI	07/30/2015	WELLS FARGO		878,270	730,000	894,513	884,377	.0	(9,946)	.0	(9,946)	.0	874,431	.0	3,839	3,839	24,638	06/01/2023	1FE
92817L-PF-4	VIRGINIA ST RES AUTH CLEAN WTR		07/30/2015	CITIGROUP GLOBAL MARKETS		300,428	250,000	304,795	303,188	.0	(3,774)	.0	(3,774)	.0	299,414	.0	1,014	1,014	10,556	10/01/2022	1FE
97705M-AH-8	WISC ST FOR ISSUES DTD PR	MUNI	07/30/2015	RBC DOMINION SECURITIES		431,501	370,000	429,059	.0	.0	(1,117)	.0	(1,117)	.0	427,943	.0	3,559	3,559	1,747	05/01/2020	1FE
97705M-AJ-4	WISC ST FOR ISSUES DTD PR	MUNI	07/29/2015	CORP.		242,566	205,000	241,183	.0	.0	(543)	.0	(543)	.0	240,640	.0	1,927	1,927	940	05/01/2021	1FE
1799999	Subtotal - Bonds - U.S. States, Territories and Possessions			J.P. MORGAN		5,705,897	4,780,000	5,808,879	5,058,693	0	(63,705)	0	(63,705)	0	5,665,231	0	40,668	40,668	186,808	XXX	XXX
78615R-CU-5	SACRAMENTO CNTY CALIF WTR FING		07/30/2015	MORGAN STANLEY		226,525	250,000	202,500	206,484	.0	1,111	.0	1,111	.0	207,596	.0	18,929	18,929	1,216	06/01/2034	1FE
2499999	Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					226,525	250,000	202,500	206,484	0	1,111	0	1,111	0	207,596	0	18,929	18,929	1,216	XXX	XXX
3132M3-T6-4	FEDERAL HOME LOAN MTGE CO	FHLMC	09/01/2015	MBS PAYDOWN		6,588	6,588	6,743	6,600	.0	(12)	.0	(12)	.0	6,588	.0	.0	.0	169	12/01/2043	1
3138EK-GU-3	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		3,858	3,858	4,193	.0	.0	.0	.0	.0	.0	3,858	.0	.0	.0	14	03/01/2042	1
3138EN-Y9-4	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		7,660	7,660	8,206	.0	.0	.0	.0	.0	.0	7,660	.0	.0	.0	26	12/01/2044	1
3138EP-AH-7	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		17,829	17,829	19,350	.0	.0	(1)	.0	(1)	.0	17,829	.0	.0	.0	67	02/01/2045	1
3138EP-LC-6	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		11,498	11,498	12,496	.0	.0	(1)	.0	(1)	.0	11,498	.0	.0	.0	43	01/01/2043	1
3138EP-S4-7	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		6,774	6,774	7,226	.0	.0	.0	.0	.0	.0	6,774	.0	.0	.0	23	07/01/2045	1
3138W9-KQ-2	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		434	434	436	.0	.0	.0	.0	.0	.0	434	.0	.0	.0	1	08/01/2043	1
3138WD-6X-4	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		803	803	829	.0	.0	(1)	.0	(1)	.0	803	.0	.0	.0	7	02/01/2030	1
3138WE-AC-3	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		73,598	73,598	77,266	.0	.0	(209)	.0	(209)	.0	73,598	.0	.0	.0	946	03/01/2030	1
3138WE-AJ-8	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		4,834	4,834	5,071	.0	.0	(14)	.0	(14)	.0	4,834	.0	.0	.0	64	02/01/2030	1
3138WE-AM-1	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		11,124	11,124	11,678	.0	.0	(34)	.0	(34)	.0	11,124	.0	.0	.0	152	02/01/2030	1
3138WE-H4-4	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		8,500	8,500	8,773	.0	.0	(9)	.0	(9)	.0	8,500	.0	.0	.0	69	04/01/2030	1
3138XQ-BE-0	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		17,876	17,876	18,767	.0	.0	(64)	.0	(64)	.0	17,876	.0	.0	.0	224	04/01/2029	1
3138YF-E3-4	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		1,845	1,845	1,937	.0	.0	(4)	.0	(4)	.0	1,845	.0	.0	.0	23	02/01/2030	1
31411D-QK-8	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		16,492	16,492	16,646	16,516	.0	(23)	.0	(23)	.0	16,492	.0	.0	.0	631	11/01/2036	1
31411L-XD-8	FED NTL MTG ASSO	FNMA	09/01/2015	MBS PAYDOWN		8,649	8,649	8,461	8,607	.0	42	.0	42	.0	8,649	.0	.0	.0	283	04/01/2037	1
31412N-2F-2	FED NTL MTG ASSO	FNMA 30YR	08/10/2015	VARIOUS		193,676	182,706	194,875	193,486	.0	(5,790)	.0	(5,790)	.0	187,696	.0	5,979	5,979	6,858	02/01/2039	1
31412Q-RB-7	FED NTL MTG ASSO	FNMA 30YR	08/10/2015	VARIOUS		361,744	321,711	343,138	347,469	.0	(7,537)	.0	(7,537)	.0	339,931	.0	21,813	21,813	12,370	10/01/2039	1
31416S-4Y-4	FED NTL MTG ASSO	FNMA 30YR	08/10/2015	VARIOUS		717,360	637,375	679,825	674,942	.0	(1,262)	.0	(1,262)	.0	673,680	.0	43,680	43,680	24,530	06/01/2039	1
31417F-Y4-4	FED NTL MTG ASSO	FNMA	07/28/2015	VARIOUS		259,075	257,316	256,030	255,980	.0	106	.0	106	.0	256,086	.0	2,990	2,990	5,143	03/01/2045	1
31418A-VS-4	FED NTL MTG ASSO	FNMA	09/30/2015	VARIOUS		769,766	758,631	761,832	.0	.0	(28)	.0	(28)	.0	761,804	.0	7,962	7,962	2,714	08/01/2043	1
373384-Y3-4	GA ST	MUNI	07/29/2015	MERRILL LYNCH		413,986	360,000	411,019	.0	.0	(837)	.0	(837)	.0	410,183	.0	3,803	3,803	1,200	07/01/2019	1FE
494890-A2-2	KING COUNTY WA	MUNI	07/28/2015	CITIGROUP GLOBAL MARKETS		164,864	140,000	163,325	.0	.0	(565)	.0	(565)	.0	162,760	.0	2,104	2,104	1,906	12/01/2020	1FE
68607V-P3-3	OREGON ST DEPT ADMINISTRATIVE	MUNI	07/28/2015	INC		122,362	105,000	121,552	.0	.0	(461)	.0	(461)	.0	121,091	.0	1,270	1,270	1,750	04/01/2020	1FE
70914P-YH-9	PENNSYLVANIA ST	MUNI	08/13/2015	RAYMOND JAMES		286,857	265,000	286,857	.0	.0	(927)	.0	(927)	.0	285,930	.0	927	927	2,282	08/15/2017	1FE
882723-QE-2	TEXAS ST	MUNI	08/31/2015	MERRILL LYNCH		290,000	290,000	290,319	.0	.0	(319)	.0	(319)	.0	290,000	.0	.0	.0	4,314	08/31/2015	1
88283L-JX-5	TX TRANSN COMMN ST HWY FD R	MUNI	08/25/2015	MATURITY		402,970	325,000	402,155	.0	.0	(178)	.0	(178)	.0	401,977	.0	993	993	1,598	10/01/2025	1
3199999	Subtotal - Bonds - U.S. Special Revenues			CITIGROUP GLOBAL MARKETS		4,181,022	3,841,101	4,119,005	1,503,600	0	(18,128)	0	(18,128)	0	4,089,500	0	91,521	91,521	67,407	XXX	XXX

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Humana Benefit Plan of Illinois, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2		3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
											11	12	13	14	15								
CUSIP Ident-ification	Description		For-foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid-eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Other Than Temporary Impairment Recog-nized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received DuringYear	Stated Con-tractual Maturity Date	NAIC Desig-nation or Market In-dicator (a)	
023767-AA-4	AMERICAN AIRLINES INC	CORPORATE		07/31/2015	CALLLED SECURITY at 100.000		3,006	3,006	3,006	3,006	0	0	0	0	0	3,006	0	0	0	158	07/31/2021	1FE	
0258M0-DA-4	AMERICAN EXPRESS CO	CORPORATE		09/15/2015	MATURITY	100,000	100,000	99,416	99,910	99,910	0	90	0	90	0	100,000	0	0	0	2,750	09/15/2015	1FE	
07388R-AF-4	BEAR STEARNS CO.	CMBS		09/11/2015	VARIOUS	170	170	188	181	181	0	(11)	0	(11)	0	170	0	0	0	8	02/01/2044	1FM	
125896-BA-7	CMS ENERGY CORPORATION	CORPORATE		07/27/2015	AMHERST SECURITIES	59,894	55,000	63,181	59,327	59,327	0	(956)	0	(956)	0	58,371	0	1,523	1,523	3,733	07/17/2017	2FE	
14309U-AA-0	CARLYLE HOLDINGS FINANCE LLC	CORPORATE		07/27/2015	BARCLAYS CAPITAL	25,473	25,000	24,992	24,993	24,993	0	1	0	1	0	24,994	0	480	480	966	02/01/2023	1FE	
20173W-AF-5	OMLTI	CMBS		09/10/2015	VARIOUS	575	575	653	642	642	0	(67)	0	(67)	0	575	0	0	0	23	12/01/2049	1FM	
42217K-AY-2	HEALTH CARE REIT INC	CORPORATE		07/29/2015	WELLS FARGO	922,863	875,000	872,323	873,234	873,234	0	226	0	226	0	873,460	0	49,402	49,402	30,279	04/01/2019	2FE	
437076-AP-7	HOME DEPOT	CORPORATE		07/30/2015	ROBERT BAIRD	205,502	200,000	199,193	199,843	199,843	0	77	0	77	0	199,920	0	5,582	5,582	9,990	03/01/2016	1FE	
46625H-MN-7	JP MORGAN CHASE	CORPORATE		07/29/2015	BNP PARIBAS	278,336	275,000	273,966	0	0	0	0	0	0	273,966	0	4,370	4,370	358	07/15/2025	1FE		
46630J-AC-3	JP MORGAN CHASE	CMBS		09/15/2015	VARIOUS	3,749	3,749	4,310	4,133	4,133	0	(383)	0	(383)	0	3,749	0	0	0	138	01/01/2049	1FM	
46632H-AG-6	JPMCC 07-LD12	CMBS		09/15/2015	VARIOUS	146	146	166	159	159	0	(14)	0	(14)	0	146	0	0	0	6	02/01/2051	1FM	
50180J-AD-7	LBUBS 07-C2	CMBS		09/17/2015	VARIOUS	148	148	161	157	157	0	(9)	0	(9)	0	148	0	0	0	5	02/15/2040	1FM	
60687V-AF-2	MLCFC 06-3	CMBS		09/14/2015	VARIOUS	242	242	267	258	258	0	(16)	0	(16)	0	242	0	0	0	9	07/01/2046	1FM	
61750W-AS-2	MSC-99	CMBS		09/15/2015	VARIOUS	6,882	6,882	7,578	7,517	7,517	0	(634)	0	(634)	0	6,882	0	0	0	219	12/01/2043	1FM	
61751N-AB-8	MSC_07-HQ11	CMBS		09/14/2015	VARIOUS	251	251	275	266	266	0	(15)	0	(15)	0	251	0	0	0	9	02/01/2044	1FM	
74432N-AA-0	PRUDENTIAL COVERED TRUST			09/30/2015	MATURITY	1,540,000	1,540,000	1,540,000	1,540,000	1,540,000	0	0	0	0	0	1,540,000	0	0	0	46,154	09/30/2015	1FE	
78446X-AB-1	SALLIE-MAE_12-B	ABS FEST		07/30/2015	HSBC SECURITIES INC.	2,053,984	2,000,000	1,999,795	1,999,820	1,999,820	0	6	0	6	0	1,999,826	0	54,159	54,159	44,273	12/16/2030	1FE	
92978P-AF-6	WBOMT 03	CMBS		09/17/2015	VARIOUS	7,303	7,303	8,041	7,312	7,312	0	(11)	0	(11)	0	7,303	0	0	0	289	11/01/2048	1FM	
13643E-AG-0	CANADIAN OIL SANDS LTD	CORPORATE	A	09/29/2015	CANTOR FITZGERALD	205,494	245,000	243,091	243,519	243,519	0	144	0	144	0	243,663	0	(38,171)	(38,171)	5,540	04/01/2022	2FE	
45326Y-AA-5	INCITEC PIVOT LTD	CORPORATE	F	08/11/2015	BARCLAYS CAPITAL	176,313	175,000	173,600	174,719	174,719	0	175	0	175	0	174,894	0	1,419	1,419	4,803	11/29/2015	2FE	
85235X-AC-9	STADSHYPOTEK AB	CORPORATE	F	08/24/2015	RBS SECURITIES INC	250,750	250,000	248,973	249,285	249,285	0	96	0	96	0	249,380	0	1,370	1,370	4,232	10/02/2019	1FE	
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)							5,841,081	5,762,472	5,763,175	5,488,281	0	(1,301)	0	(1,301)	0	5,760,946	0	80,134	80,134	153,942	XXXX	XXX	
8399997. Total - Bonds - Part 4							16,024,054	14,703,102	15,963,995	12,314,316	0	(82,053)	0	(82,053)	0	15,792,802	0	231,252	231,252	411,525	XXX	XXX	
8399998. Total - Bonds - Part 5							XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999. Total - Bonds							16,024,054	14,703,102	15,963,995	12,314,316	0	(82,053)	0	(82,053)	0	15,792,802	0	231,252	231,252	411,525	XXX	XXX	
8999997. Total - Preferred Stocks - Part 4							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
8999998. Total - Preferred Stocks - Part 5							XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799997. Total - Common Stocks - Part 4							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799998. Total - Common Stocks - Part 5							XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999. Total - Common Stocks							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9899999. Total - Preferred and Common Stocks							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9999999 - Totals							16,024,054	XXX	15,963,995	12,314,316	0	(82,053)	0	(82,053)	0	15,792,802	0	231,252	231,252	411,525	XXX	XXX	

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues.....0

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open
N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made
N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To
N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned
N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned
N O N E

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
					First Month	Second Month	Third Month	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date				*
US BANK Milwaukee, WI		0.000	0	0	(4,004,793)	(3,653,904)	(4,238,751)	XXX
US BANK Milwaukee, WI		0.000	0	0	40,550	95,776	34,570	XXX
JP MORGAN CHASE New York, NY		0.000	0	0	22,853	282	3,356	XXX
0199998. Deposits in ... 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	(3,941,391)	(3,557,846)	(4,200,825)	XXX
0299998. Deposits in ... 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	(3,941,391)	(3,557,846)	(4,200,825)	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
.....								
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.....								
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.....								
.....								
.....								
0599999. Total - Cash	XXX	XXX	0	0	(3,941,391)	(3,557,846)	(4,200,825)	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

[illegible]